Washington State Cancer Registry

Background

In 1990, RCW 70.54.230 made cancer a reportable condition in Washington and mandated the Department of Health to establish a statewide cancer registry program. Under this mandate, the Department established the Washington State Cancer Registry (WSCR) in 1991. The registry is dedicated to fulfillment of the legislative intent "...to establish a system to accurately monitor the incidence of cancer in the state of Washington for the purposes of understanding, controlling, and reducing the occurrence of cancer in this state." In 1995, WSCR received funding through the Centers for Disease Control and Prevention's National Program of Central Cancer Registries. This program is designed to standardize data collection and provide information for cancer prevention and control programs at the local, state and national levels.

Data Collection

WSCR began its operations in July of 1991 and contracts for data collection with two regional tumor registries that together cover the entire state. The contractors are responsible for case-finding, abstracting information on cancer cases in their respective regions, and reporting to the statewide registry. The Cancer Surveillance System (CSS) of the Fred Hutchinson Cancer Research Center provides data on cancer cases from 13 counties in Western Washington, covering the majority of the state's population including the largest urban center of Seattle. CSS has been in operation since 1974 as a participant in the Surveillance Epidemiology and End-Results (SEER) Program of the National Cancer Institute (NCI). The Walla Walla-based Blue Mountain Oncology Program (BMOP), under contract with the Department of Health, has expanded the activities of its 14 facility-based registry to cover the remainder of the state. BMOP also conducts regular data exchanges with hospitals in Oregon and Idaho to gather data on Washington residents traveling across state lines for cancer diagnosis and treatment.

The contractors receive reports of cancer cases from hospitals, pathology laboratories, radiation oncology centers, ambulatory surgical centers, cancer treatment centers and physicians. Contract staff complete data abstraction on all reported cases or collect abstracts from hospital tumor registrars who complete them. The contractors also carry out quality assurance activities and provide WSCR with data tapes on a regular basis. WSCR is responsible for merging the data and finalizing the statewide data set, overall data quality assurance in accordance with national standards, and dissemination of cancer information to assist with cancer prevention and control efforts statewide.

The cancer reporting rules (246-430 WAC) define reportable cancer cases as "any malignant neoplasm, with the exception of basal and squamous cell carcinoma of the skin". Also specifically included are: 1) basal and squamous cell carcinoma of the external genital organs (vulva, labia, clitoris, prepuce, penis, anus, scrotum); 2) all brain tumors; 3) ovarian tumors of borderline or low malignant potential and 4) cancer in-situ, except cancer in-situ of the uterine cervix. The legally required data for cancer reporting include demographic and medical information about all newly diagnosed cases. Copies of Washington's cancer reporting legislation and regulations are available on request.